

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)	Attorney Docket Number	VOS-117
	First Named Inventor	Klaus CICHUTEK et al.
	COMPLETE IF KNOWN	
	Application Number	
	Filing Date	October 5, 2004
	Group Art Unit	
	Examiner Name	

☐ Declaration Submitted with Initial Filing
 ☒ Declaration Submitted after Initial Filing

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first, and sole inventor (if only one name is listed) or an original, first, and joint inventor (if more than one name is listed) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

LENTIVIRAL VECTORS DERIVED FROM SIVSMM/PBJ14, METHOD FOR THEIR PRODUCTION AND USES THEREOF

the specification of which:

- ☐ Is attached hereto:
☒ was filed on April 03, 2003 as PCT International Application Number PCT/EP03/03500.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.
 I acknowledge the duty to disclose information which is material to the patentability of this application, as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO	
10215123.7	Germany	04/05/2002	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet attached hereto.

I hereby claim the benefits under 35 U.S.C. 119(e) of any United States provisional application listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet attached hereto.

BEST AVAILABLE COPY

DECLARATION

- Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below, and insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of Title 35 U.S.C., 112, I acknowledge the duty to disclose information which is material to patentability, as defined in 37 C.F.R. 1.56, which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
PCT/EP03/03500	04/03/2003	

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet attached hereto.

As a named inventor, I hereby appoint the individuals of the firm of Olson & Hierl, Ltd. associated with the following customer number to prosecute this application and to transact all business connected therewith in the Patent and Trademark Office:

☒ Customer Number **002387**

Whose name/registration numbers are listed below

Name	Registration Number	Name	Registration Number
Arne M. Olson	30,203	Michael A. Hierl	29,807
Dolores T. Kenney	31,269	Tativaldis Cepuritis	20,818
Seymour Rothstein	19,369	Martin J. Corn	35,847
Joseph M. Kuo	38,943	John W. Klooster	18,953
Robert J. Ross	45,058	Joseph Krause	32,578

Direct all correspondence to ☒ Customer Number **002387** Whose mailing address for this application is below:

Name	ATTENTION: Tativaldis CEPURITIS OLSON & HIERL, LTD.		
Address	20 North Wacker Drive, 36th Floor		
City	Chicago	State	IL
		ZIP	60606
Country	US	Telephone	(312) 580-1180
		Fax	(312) 580-1189

I hereby declare that all statement made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:

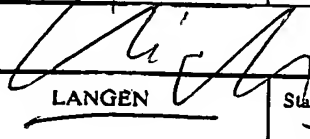
☐ A petition has been filed for this unsigned inventor

Given Name (first and middle, if any)

Family Name or Surname

KLAUS

CICHUTEK

Inventor's signature				Date:	16. Dez. 2004
Residence	City	State	Country	Citizenship	
	<u>LANGEN</u>	<u>DEX</u>	GERMANY	GERMAN	
Post Office Address	THEODOR-HEUSS-STRASSE 54				
	City	State	ZIP	Country	
	LANGEN		63225	GERMANY	

☒ Additional inventors are being named on the (1) supplemental Additional Inventor(s) Sheet(s) attached here

BEST AVAILABLE COPY

DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet

Page 1 of 1

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))

Family Name or Surname

MICHAEL

MUEHLEBACH

Inventor's
Signature

Date 16. Dez. 2004

Residence: City

SCHOENECK

DEX

State

Country

GERMANY

Citizenship GERMAN

Mailing Address

WALDSTRASSE 65

Mailing Address

City

SCHOENECK

State

Zip 61137

Country GERMANY

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))

Family Name or Surname

MATTHIAS

SCHWEIZER

Inventor's
Signature

Date

16. Dez. 2004

Residence: City

FREIBURG

DEX

State

Country GERMANY

Citizenship GERMAN

Mailing Address

LUCKENBACHWEG 2

Mailing Address

City

FREIBURG

State

Zip 79115

Country GERMANY

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))

Family Name or Surname

Inventor's
Signature

Date

Residence: City

State

Country

Citizenship

Mailing Address

Mailing Address

City

State

Zip

Country

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.

BEST AVAILABLE COPY